DOCUMENT RESUME

ED 204 037 PS 012 285

AUTHOR Russell, Graeme
TITLE The Changing Role of Fathers. Unit for Child Studies Selected Papers Number 9.
INSTITUTION New South Wales Univ., Kensington (Australia). School of Education.
PUB DATE 80
NOTE 10p.: For other papers in this series, see PS 012 277-284.
AVAILABLE FROM Unit for Child Studies, School of Education, University of NSW, P.O. Box 1, Kensington, NSW 2033, Australia ($2.00: payment should be made in Australian dollars).

EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS *Child Rearing; Family Problems; *Family Structure; *Fathers; Foreign Countries; *Mothers; Parent Attitudes; Parent Education; *Parent Role; Postsecondary Education; Sex Stereotypes; *Social Change
IDENTIFIERS *Australia; Parenting

ABSTRACT

The ideas that fathers do not have the ability to care for children and that it is not good for families to have fathers take a major responsibility for caregiving are not supported by recent research findings. Observations of fathers interacting with newborn infants reveal that fathers can be just as sensitive and competent in caregiving as mothers. Although there are problems associated with being a shared-role family, parents in such families report benefits. Fathers saw that they had improved relationships with their children; mothers gained self-esteem. Research indicates that children in shared-role families, overall, have more play/stimulation type contact than do children in traditional families. Even so, deep-seated objections concerning fathers as caregivers remain prevalent. Some objections are that fathers in the home may (1) contribute to increased child abuse and/or incest, (2) cause an increase in homosexuality, and (3) diminish the "natural" mother-child attachment bond. Findings of research indicate that men are more likely to be traditional in their views than women about parental roles. To reduce the current reliance in Australia on the mother as sole caregiver, a new image of fathers as nurturant, more recognition of the importance of fathers by hospital and medical staff, more flexible work hours, and a more honest recognition of the difficulties of family life are needed. (Author/RH)

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ED204037

Selected Papers

Unit for Child Studies

Number 9

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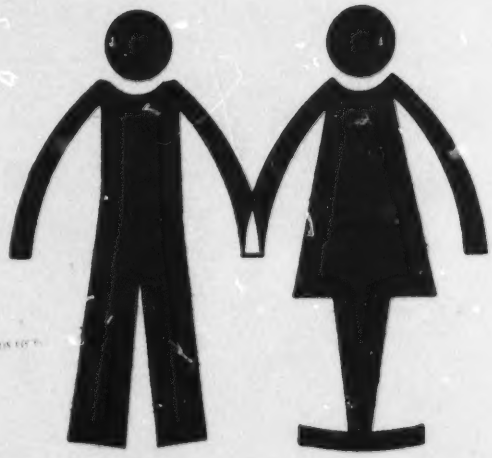

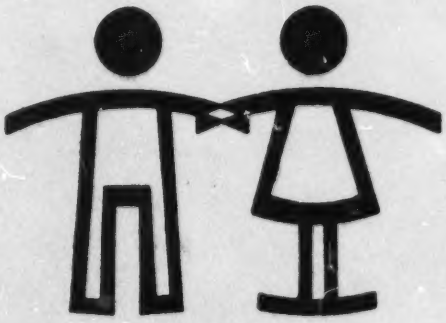

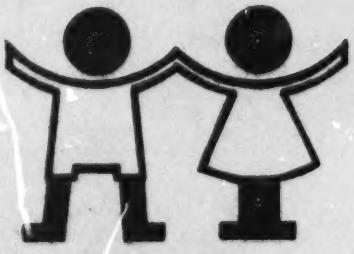

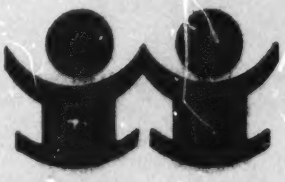

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662 2181

THE CHANGING ROLE OF FATHERS

DR GRAEME RUSSELL

THE CHANGING ROLE OF FATHERS

GRAEME RUSSELL

School of Behavioural Sciences

Macquarie University

Until very recently fathers were neglected in studies of the family. Psychologists and others spent their time investigating mothers and children. An emphasis on the study of mothers, it could be argued, is reasonable enough; in the overwhelming majority of families, fathers usually carry out less than an equal share of caregiving - even when you take into account the differences in time spent at home. In families I have studied, mothers, on average, performed 85% of childcare tasks, but fathers only 15% (Russell, 1978).

Why is it then that fathers have been both *neglected and neglecting*? An answer to this question revolves around two beliefs about childcare that have widespread acceptance.

(i) That *fathers do not have the ability* to care for children; that only mothers do.

(ii) That *it is not good for families* to have fathers take a major responsibility for caregiving; it is *better* if mothers do.

These views have been expressed succinctly by Bowlby when he said recently:

> "Mothers are especially prepared biologically; if mothers don't look after babies then babies are not going to prosper." (Tucker, 1976)

Recent evidence we have, however, casts serious doubt on this view.

First, let us consider the belief that father's can not do it.

It seems they can - if they want to, or if they have to. Studies show that fathers can be just as sensitive and competent in caregiving as mothers. In one group of studies researchers have compared the psychological and physiological responses of mothers and fathers to infant smiles and cries (Frodi & Lamb, 1978). Findings show that when given this opportunity and encouragement, fathers are just as sensitive and responsive to infants as mothers are.

In another group of studies mothers and fathers were observed interacting with their newborn babies in the first few days after birth (see Parke, 1979). Fathers were found to be just as involved with, and nurturant towards, their infants (e.g., in touching, looking at, kissing, talking to). Also, fathers were found to be just as competent in a feeding context. They were equally likely to be able to detect infant cues, e.g., sucking, burping, and coughing, and were just as successful - as measured by the

amount of milk consumed by the infant. There seems no reason to expect that fathers would not display similar competence in other day-to-day caregiving tasks. Strong support for this proposition is given by my own study of shared-role families (Russell, 1979, 1981).

These are families, a minority as they are, in which mothers and fathers share the day-to-day caregiving responsibilities equally or nearly equally. For example, in one family the mother worked full-time as a teacher, and the father worked full-time at night as a process worker and he cared for their two-year-old daughter during the day. In the majority of families it was the father who had the major responsibility for care during the day. There were some minor variations in the sharing of tasks, however. In one family the parents reported that they shared everything except dirty nappies (mother's job) and taking the garbage out (father's job). It appears that old smelly customs die hard!

Both the mothers and fathers in these shared-role families were adamant that fathers were successfully carrying out the role of caregiver; that after a period of adjustment and some quick on-the-job learning, they were as competent as the mothers were.

As one father said:

> "I don't believe in a maternal instinct. It's all rubbish. If a person wants to - if a man wants to, a man can do it just as well. Obviously he can't breastfeed, but he can do everything else."

This group of competent caregiving fathers was very diverse in background, education and occupation. They were not simply members of an educated middle class. And they also included a number of fathers who originally took on the caregiving role very reluctantly - those who had been forced into it by economic circumstances. Nevertheless, they, too, were seen as competent.

The diversity of this group is illustrated very nicely by a fitter and turner from the outer western suburbs of Sydney. I joined the family (mother, father, mother's father and uncle) in a few beers while they finished their evening meal. The men had been at the "boozer" for a few hours that afternoon, and so they were running late. As well as being a fitter and turner in a large factory, the father worked as an S.P. bookmaker on Friday nights and Saturday afternoons. To complete this "typical male" image, he owned a young greyhound which he hoped to race, and went to the club on Sunday nights to watch the football replays on colour television. But, there *was* another side. The father had cooked the evening meal that night, he was totally involved with his children, had taken time off work to look after his first child when his wife spent a month in hospital before the birth of their second child, and what is more, he had attended *every* visit his wife made to the doctor before the birth of both children. He *wanted* to be involved in all aspects!

It seems, therefore, that fathers are much more competent than was previously believed, and that this competence transcends traditional social class barriers. Also, many fathers, albeit a minority, are already displaying this competence by their commitment to daily caregiving.

The second belief that I mentioned earlier was that it is not good for families to have fathers heavily involved in caregiving.

Parents in shared role families, however, had a very different view about this; they saw considerable benefits in having fathers highly in-

volved in childcare, benefits for fathers, mothers, and children.

Fathers were very definite in their view that the major benefit for them was their improved relationships with their children. All fathers spoke very strongly about this! This involvement added another dimension to their lives, one which they said gave them immense personal satisfaction. For example:

"I think it increased the amount of pleasure I get from them."
"Our relationship has become much closer - he shows a lot more affection towards me, and I understand him more."

The most important benefit seen for mothers was their increased self-esteem. The increased value they now placed on themselves as a result of their involvement both inside and outside the home. Many also felt that they had become more tolerant towards their children as a result of the burden for childcare being shared.

It is interesting to note that when I asked parents in traditional families how they would like to change their behaviour to improve their relationships with their children, mothers said they would like to become more tolerant, and fathers said they would like to spend more time with their children. It seems that shared-role families have effected these changes.

Nevertheless, there were some problems. Fathers especially, experienced problems in the early stages in adjusting to their new roles. E.g.,

"I got exasperated with the mess and the mischief. At first I tended to get into a rut, a woman's rut."

"I got a bit frustrated with it - nothing to do - I've even resorted to turning the TV on. I hate to admit it, but I actually watched Mike Walsh the other day."

From the mother's point of view, some said they had feelings of regret, and at times guilt about leaving their children and having less contact with them.

Strain on marital relationships in the early stages of changing roles was also reported. Over a longer term, however, many felt that if anything, their relationships had improved as a result of the increased understanding they now had of each others' roles and the pressures associated with them (e.g., men's understanding of the demands of being at home with children; women's understanding of coming home to the family after work).

Indeed, *family commitment* was very strong in this group, and the majority reported spending what free time they had in family activities rather than on personal leisure. Furthermore, most of the couples felt very strongly about who cared for their children:

"We organised our jobs so that we didn't have to have a babysitter ... we want to have the major influence."

So it seemed that their changed lifestyles and having fathers more involved actually strengthened the family unit.

The active support and involvement by fathers has also been found to be important for *family adjustment* during pregnancy, birth, and the newborn period (see Parke, 1979). For example, fathers' support and involvement have been found to be related to:

1. A mother's successful adaptation to pregnancy;
2. The lessening of maternal stress during labour and delivery;
3. The lessening of post-partum blues; and
4. A greater effectiveness by mothers at feeding.

What about the children? Is this lifestyle good for the children?

While several parents said they had some doubts about the longterm effects their lifestyles might have on their children, no one reported any adverse reactions. E.g., "There doesn't seem to be any bad side of it from Luke's point of view. He has adjusted well. That surprised us."

Rather than "having a bad side to it" it seems that children can only gain from having both parents actively engaged in child care. In my own work I have found that children in shared-role families, overall, have more play/stimulation type contact with their parents than do children in traditional families. Some interesting preliminary findings have also been reported from the U.S.. It was found that in families where fathers were highly involved, there was more cognitive stimulation, especially for girls and that children in these families were more independent, and had a greater sense of mastery of their own fate (Radin, 1978).

I find it interesting that despite the obvious advantages of fathers becoming more involved, many people have some very deep-seated reservations. It has been suggested to me, for example, that this will increase markedly the incidence of child bashing (by men). Another suggestion has been that it will increase the incidence of incest between fathers and daughters. This kind of objection was raised in a recent Women's Weekly article on incest (April, 30, 1980) They reported on a Mother's Union report. It said:

> " ... working mothers may quite inadvertently contribute to the problem by involving husbands more and more in the care of young and growing children. One of the very sad things which has become evident in research is the development of an incestuous relationship between a father and daughter which has its beginnings in the innocence and love of the child and the love and care of a father. Most incest begins for a child in very tender years when its seriousness cannot be assessed or even guessed at by the child. A little girl who has been bathed and cared for by a loving father, whose nappies have been changed, and whose body has been handled lovingly and carefully by that same father is not in a position to realize or understand that the relationship has changed and is no longer innocent."

Another objection about fathers being involved concerns the child's sexual identity.

Indeed, this was an objection made by a Sydney television commentator prior to my being interviewed about my work. He said that it worried him that having fathers more involved in childcare might result in there being more "poofs" ... and Australia already had enough of those!

Although the evidence is not yet available, it seems extremely unlikely that having fathers more involved in child care would change current patterns of sexual identity. A more likely outcome, however, is that children's basic sexual identity would be unchanged, but they might have a different view about which overt behaviours are appropriate for either sex. In fact, there is already some support for this from a U.S. study on shared-role families (Radin, 1978). It was found that the sexual identity of preschoolers in shared-role families were no different from those of pre-

schoolers in traditional families; but they did hold less stereotypic views about parental roles.

Another fundamental objection is that it is not natural, *the mother-child attachment bond is special* - children need their mothers. This mother-infant attachment bond has been seen by many to be necessary for development both in the short-term (e.g., emotional and social development) and in the long-term (e.g., the ability to form deep relationships). While it probably cannot be denied that there is something special and important about the relationship between a child and its caregiver or caregivers, recent findings show quite clearly that this relationship is not unique to the mother. Recent naturalistic and laboratory based studies of father/infant relationships show that infants are attached to their fathers in much the same way as they are attached to their mothers (Lamb, 1981). Moreover, it could be argued that having close relationships with both parents (or more adults for that matter), is under most circumstances preferable to having close relationships with only one parent, e.g., in the event of the death of one parent. The evidence discussed here also suggests that there are advantages for parents as well.

We hear a lot about bonding these days, and how it is necessary that mothers have physical contact with their babies in the first hours after birth to ensure that the mother/infant bond develops. I haven't the time to go into all the arguments or findings here. However, I would like to say that recent findings suggest that earlier claims about mother/infant bonding being unique, occurring in the first few hours after birth, and having long-term implications for child development, are exaggerated.

The overall impression gained from recent findings, therefore, is that there are significant advantages in changing parental roles to have fathers more involved and that objections such as they can't do it, and it is not good for children, are unfounded. But, how can we move toward greater involvement by fathers? This, it seems, is dependent on changes both in people's attitudes and beliefs, in societal institutions and support systems, as well as changes in the employment structure.

Mention has already been made of the beliefs people currently hold about the roles of mothers and fathers. Let me give you a more vivid illustration of these and the ways in which they relate to the daily lives of people.

In this traditional family there were four boys, ranging in age from 15 to six weeks. All four children presented some type of problem to their parents, ranging from poor performance at school and a likely failure in the school certificate, to feeding and sleeping problems with the baby. In the words of the mother (Wendy):

> "He doesn't sleep at all during the day, he just bellows. I've tried everything; gripe water, infacol, boiled water, rocking him, nursing him. I let him cry until he screams and then I get him up. I can't get anything done. I took him to the clinic sister and she said it was because *I* was too tense - it was rubbing off on him. He's in pain all day, you can see it in his face - how could *I* do that to him? I took him to the doctor's last Friday. I had the last appointment at 5.40; I had to wait until then until Ted came home. I didn't get in until 6.30. Barry screamed the whole time. The doctor wouldn't give me anything, he was very short with me, that upset me. Maybe *he* had a bad day and made him cranky. I think he could have given me something. I'm not sure how much longer I can take this."

Wendy was very negative about all aspects of her role as mother, the constancy of it, the nagging and yelling she had to do all the time to ever

get her children to do anything. She also felt that her husband, Ted, could help a lot more. Ted, however, seemed not to be aware of many of Wendy's problems. Ted, a bootmaker by trade, was now in the regular Army where he was a driver. He usually left home at about 6.30 a.m. and returned between 5 and 6 p.m. Every fifth weekend he was required to spend at the army base on guard duty. On Saturdays he played tennis. He very rarely played with his children, and only very occasionally gave the baby a bottle. Some of the contrasting views of Wendy and Ted about their roles as parents were as follows:

Question (Q): What do you see as being your role and responsibilities as a mother/father?

Wendy: "Being a mother is a lot of hard work. You're on the go all the time. Washing, ironing, cooking, looking after them. I don't think I'm looking after them properly."

Ted: "My role as a father is to provide for them, to give guidance to the kids, try to teach them right from wrong. To respect other people's property, to respect elders, to give them a certain amount of discipline."

Q: "What about a father's/mother's role (i.e., opposite parent's role)? How do you see that?"

Wendy: "It's a man's world, not a woman's world. They have more liberties. I'm tied down with the baby all the time. I can't remember the last time I went out without the children. We don't have anyone to look after them. My parents are both dead, and Ted's mother is too sick, at least that's what she says. We couldn't get other people to look after them unless we paid them. We can't afford that. But no one ever offers, you have to ask them all the time. I don't like doing that. Ted can go out whenever he likes, he goes to tennis every Saturday, and out to the hotel. He should be home helping me more, playing with the kids and helping them with their school work."

Ted: "A father teaches them different things. She nurses them and cares for them. A father handles serious problems, teaches them a goal, something to aim for, something I never had as a kid. A father should have more control over them. I do more than mum, she has enough problems. It is a father's job to teach them discipline."

Q: "Do you think that women have a maternal instinct? Do you think that women are more capable than men are at caring for children?"

Wendy: "I think so - it's something your mother teaches you, and you just have that instinct. Men are not born with it, but they could do it. They should be able to cook and look after them as good as mother. I think they think that's a woman's job."

Ted: "Yes, a woman is more durable. They have more endurance than men. It's just part of a woman. They go from sun-up to sun-set, they don't seem to get sick. A woman is more organised with housework, it just comes natural."

Q: "What do you enjoy about being a parent?"

Wendy: Nothing!

Ted: "I enjoy my kids, playing with them, teaching them things, taking

them places."

Q: "Are there any things you dislike about being a parent?"

Wendy: "The shouting and the nagging. The work, all the washing and ironing for four boys."

Ted: "Nothing. I enjoy fatherhood."

Overall, I have found that men are much more traditional in their views about parental roles than women are. Men are more likely to say that women have a maternal instinct, more likely to say that a mother's place is in the home, and significantly less likely to say that men have the ability to perform the caregiving role.

Thus, there seems a need to present a new image of fathers; one which portrays them as being more significant to their children, and more competent and capable in a caregiving/nurturant role. But we also need to find ways of getting this new knowledge to them. In the U.S., one group of researchers made a film with male caregivers engaged in play, feeding and changing nappies, and they showed this to fathers in the hospital in the first few days after birth. In a follow-up three months later these fathers were found to be more involved in caregiving tasks than a control group of fathers who hadn't watched the film. A similar finding was reported from Sweden when fathers were provided with the opportunity to learn and practice basic caregiving tasks in the hospital. Thus, it seems important that we look for ways of encouraging fathers' involvement by helping them acquire the necessary skills. The best time for this is likely to be in hospitals just after the birth.

At the same time, we need to think of ways to change the image of fathers performing these tasks. Looking after children, changing nappies and the like, are not part of our cultural models of masculinity. Indeed, fathers in shared-role families encounter this reaction quite often, e.g., as one timber worker said: "Most of the blokes at the pub send off at me about being a woman". A more visible model of fathers engaged in child care, e.g., through films and the media, would help to change these one-sided ideas about sex-appropriate behaviour for males.

More status also needs to be given to fathers by hospital and medical staff, as a way of encouraging them to be *active* participants *in all aspects* of the birth and in the period immediately after the birth. More freedom could be given to fathers to spend time in maternity wards, and they could be encouraged to become involved in all aspects of the early care of their infants, not just be present at the birth. The extent to which fathers can be involved in this early period though, is also dependent on the demands of employers. As such, serious consideration needs to be given to the introduction of paternity leave (or reintroduction in the case of federal employees).

Changes are also needed in work hours and career structures to enable more fathers to participate on a continuing day-to-day basis. Flexibility of work hours, and more opportunitites for people to job share, would allow more fathers to become more involved at home, and more mothers to be involved in the workforce. In short, it would increase markedly the possibility of families adopting a shared-role lifestyle, a lifestyle which could have both long and short-term benefits for *all* family members.

Finally, at a more general level, there is a need to evaluate attitudes towards family participation and the need for support. A more honest recognition of the *difficulties* of family life is needed, together with a more

open discussion about their implications. There is a strong argument for moving towards the position of having all family members involved so that everything does not depend on one person, as is the case in so many Australian families now (e.g., Wendy and Ted discussed earlier).

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